| | PLICATION FOR ISTATEMENT | FLORIDA DEPA Sandra Secret | ARTMENT OF STATE B. Mortham lary of State F CORPORATIONS | COMPLETING THIS FORMER AND FILED 97 DEC 31 AM11: 42 |
|--|---|---|---|---|
| DOCUMENT # MO7090 1. Corporation Name NENETTE, INC. | | | | SECRETARY OF STATE TALLAHASSEE, FLORIDA |
| 4701 N. FEDERAL HWY 6383 V | | Mailing Address 6383 VIA ROSA BOCA RATON FL 33433 US | | |
| If above addresses are incorrect in any way, line throws. 2. New Principal Office Address, if Applicable Suffe, Apt. #, etc. City & State | | 3. New Mailing Office Address, If Applicable Sulte, Apt. #, etc. City & State | | 4. Date Incorporated or Qualified To Do Business in Florida 10/25/1984 5. FEI Number 65-0402103 Applied For Not Applied |
| Žip 3 3 7. Names | Country 433 US 4 and Street Addresses of Each Officor and | Zip | Country Oilt corporations must list at least | 6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee requires and a directors) |
| Title(s) 1 | Name of Officers and/or Directors 2 GRUNBERG, NENETTE | Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box No | | (Vumbers) 4 City / State / Zip |
| 8 | TINGHINO, THOMAS R | 5233 N.W. 89TH WAY 6383 Via Rosa | | BOCA RATON FL CORAL SPRINGS FL 33067 BOCA Palan FP 35433 200002391272 F -01/06/9801074016 |
| W | 8. Name and Address of Current | Registered Agent | | 9. Name and Address of New Registered Agent |
| GRUNBERG, NENETTE 6383 VIA ROSA BOCA RATON FL 33433 | | | Name Street Address (P Suite, Apt. #, Etc. City | P.O. Box Number is Not Acceptable) State Zip Code |
| IO. I, being Signature o Registered | Agent | ve named corporation, am t | familiar with and accept the ob | FL |
| I1. Thi | is corporation owes or ha angible Personal Propert | ns paid the curre y tax due June 3 | ent year 30. Yes | No (See other side for information on intangible tax.) |
| owed by | statement application, the reason for disso | lution has been eliminated, ames of Individuals listed o | the corporate name satisfies t on this form do not qualify for a | rovided for in chapter 607 or 617, F.S. I further certify that when filing the requirements of section 607.0401 or 617.0401, F.S., that all fees an exemption under section 119.07(3)(i), F.S. The information indicate oath. |
| SIGNAT | TURE: SIGNATURE AND TYPED OR PRI | N'eg name of signing of | ACC ICEROR DIRECTOR | 12-29-97 561368 31 |